

SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:
Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

INSTRUCTIONS: No permits will be issued until all fees are paid.
Checks are made payable to Bayfield County Zoning Department.
DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT.

APPLICATION FOR PERMIT
BAYFIELD COUNTY, WISCONSIN
DATE RECEIVED
AUG 21 2014
Bayfield Co. Zoning Dept.

ENTERED
Permit #: 14-0838
Date: 9-15-14
Amount Paid: \$2808-21-14
Refund: \$2808-21-14

\$250 + \$50 = \$300
\$8008-1-14

TYPE OF PERMIT REQUESTED: <input checked="" type="checkbox"/> LAND USE <input type="checkbox"/> SANITARY <input type="checkbox"/> PRIVY <input type="checkbox"/> CONDITIONAL USE <input type="checkbox"/> SPECIAL USE <input type="checkbox"/> B.O.A. <input type="checkbox"/> OTHER									
Owner's Name: Kelly Pauloski Shawn Sharks			21980			Mailing City/State/Zip: W. Rykus Lane Cable, WI 54821		Telephone: 715 794-2979 Cell Phone: 715 763-3302	
Address of Property: Same									
Contractor: George Wolaki			715 558-8307			Plumber: NorPines Plumbing		Plumber Phone: 739-6767	
Authorized Agent: (Person Signing Application on behalf of Owner(s))			Agent Phone:			Agent Mailing Address (include City/State/Zip):		Written Authorization Attached <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
PROJECT LOCATION		Legal Description: (Use Tax Statement)				PLIN: (23 digits) 04-021-2-44-06-21-405-103-16000		Recorded Document: (i.e. Property Ownership) Volume 1113 Page(s) 707	
1/4, 1/4		Gov't Lot 3		Lot(s) CSM Vol & Page		Lot(s) No. Block(s) No.		Subdivision:	
Section 21, Township 44 N, Range 6 W		Town of: Grand View		Lot Size		Acreage 1.81			
<input checked="" type="checkbox"/> Shoreland <input type="checkbox"/> Non-Shoreland		<input type="checkbox"/> Is Property/Land within 300 feet of River, Stream (incl. intermittent) Creek or landward side of Floodplain? <input type="checkbox"/> If Yes--continue -->				Distance Structure is from Shoreline: feet		Is Property in Floodplain Zone? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
<input checked="" type="checkbox"/> Is Property/Land within 1000 feet of Lake, Pond or Flowage		<input type="checkbox"/> If Yes--continue -->				Distance Structure is from Shoreline: 80+ feet		Are Wetlands Present? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

Value at Time of Completion * include donated time & material \$150,000	Project (What are you applying for)	# of Stories and/or basement	Use	# of bedrooms	What Type of Sewer/Sanitary System Is on the property?	Water						
							<input checked="" type="checkbox"/> New Construction	<input checked="" type="checkbox"/> 1-Story	<input type="checkbox"/> Seasonal	<input type="checkbox"/> 1	<input type="checkbox"/> Municipal/City	<input type="checkbox"/> City
							<input type="checkbox"/> Addition/Alteration	<input type="checkbox"/> 1-Story + Loft	<input checked="" type="checkbox"/> Year Round	<input checked="" type="checkbox"/> 2	<input type="checkbox"/> (New) Sanitary	<input checked="" type="checkbox"/> Well
							<input type="checkbox"/> Conversion	<input type="checkbox"/> 2-Story	<input type="checkbox"/>	<input type="checkbox"/> 3	<input checked="" type="checkbox"/> Sanitary (Exists) Specify Type: Sewer	<input type="checkbox"/>
							<input type="checkbox"/> Relocate (existing bldg)	<input type="checkbox"/> Basement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Privy (Pit) or <input type="checkbox"/> Vaulted (min 200 gallon)	<input type="checkbox"/>
<input type="checkbox"/> Run a Business on Property	<input type="checkbox"/> No Basement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> None	<input type="checkbox"/> Portable (w/service contract)	<input type="checkbox"/>						
<input type="checkbox"/>	<input checked="" type="checkbox"/> Foundation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Compost Toilet	<input type="checkbox"/>						
<input type="checkbox"/>	<input checked="" type="checkbox"/> Slab	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> None	<input type="checkbox"/>						

Existing Structure: (if permit being applied for is relevant to it)	Length: 42	Width: 42	Height: 16
Proposed Construction:	Length: 42	Width: 42	Height: 16

Proposed Use	✓	Proposed Structure		Dimensions	Square Footage
		Principal Structure (first structure on property)			
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Residence (i.e. cabin, hunting shack, etc.)		(42 x 42)	1,764
<input checked="" type="checkbox"/> Residential Use		with Loft		()	
		with a Porch		(4 x 42)	168
		with (2") Porch		()	
		with a Deck		()	
		with (2") Deck		()	
<input type="checkbox"/> Commercial Use		with Attached Garage		()	
		Bunkhouse w/ <input type="checkbox"/> sanitary, <input type="checkbox"/> sleeping quarters, <input type="checkbox"/> cooking & food prep facilities		()	
		Mobile Home (manufactured date)		()	
		Addition/Alteration (specify)		()	
		Accessory Building (specify)		()	
		Accessory Building Addition/Alteration (specify)		()	
<input type="checkbox"/> Municipal Use		Special Use: (explain)		()	
		Conditional Use: (explain)		()	
		Other: (explain)		()	

FAILURE TO OBTAIN A PERMIT OF STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information. I (we) am (are) providing in or with this application, consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection.

Owner(s): Kelly Pauloski Date 5-16-14
(if there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)

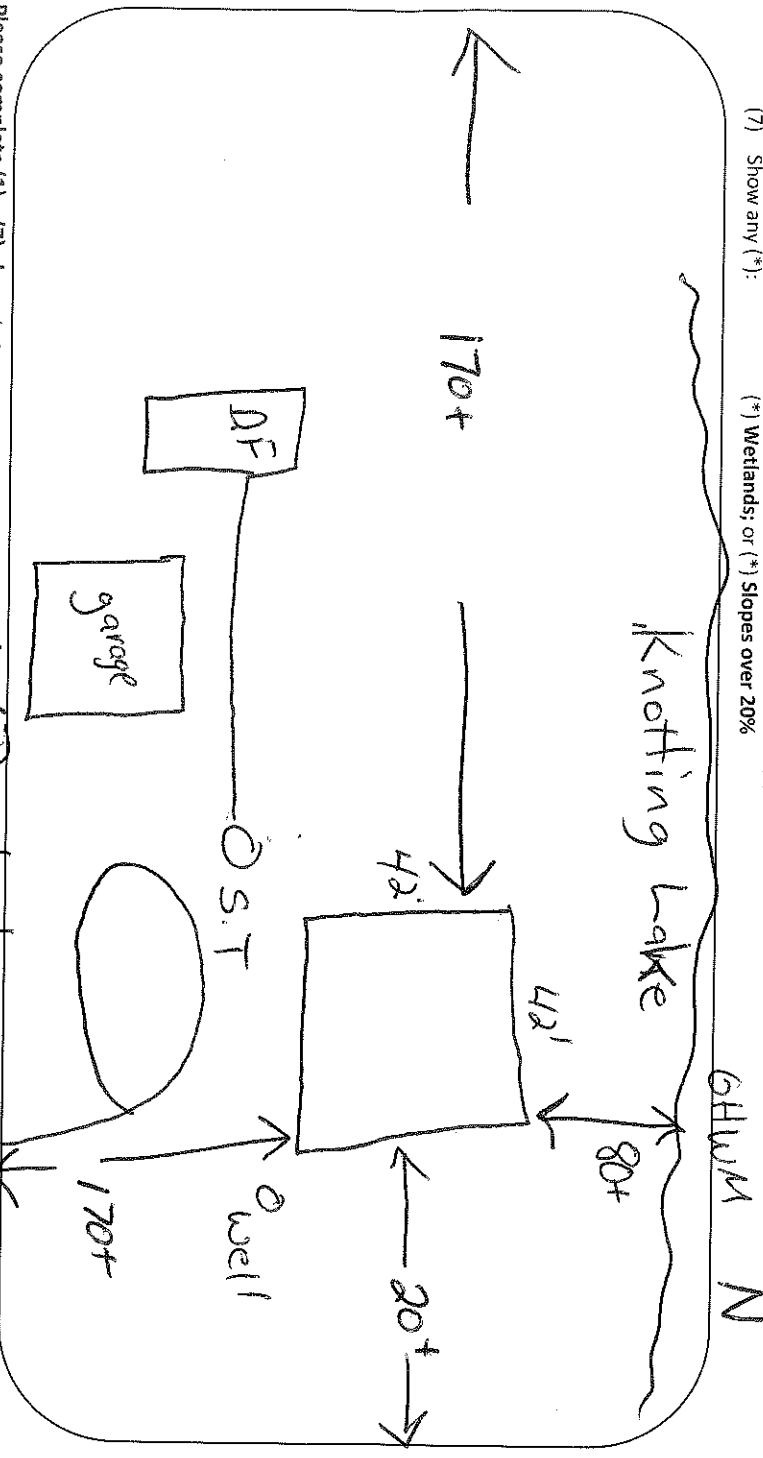
Authorized Agent: (if you are signing on behalf of the owner(s)) a letter of authorization must accompany this application Date
Address to send permit Same as above

APPLICANT - PLEASE COMPLETE PLOT PLAN ON REVERSE SIDE

Attach
Copy of Tax Statement
If you recently purchased the property send your Recorded Deed

Draw or Sketch your Property (regardless of what you are applying for)

- (1) Show Location of: Proposed Construction
- (2) Show / Indicate: North (N) on Plot Plan
- (3) Show Location of (*): (*) Driveway and (*) Frontage Road (Name Frontage Road)
- (4) Show: All Existing Structures on your Property
- (5) Show: (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P)
- (6) Show any (*): (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond
- (7) Show any (*): (*) Wetlands; or (*) Slopes over 20%



Please complete (1) - (7) above (prior to continuing)

- (8) Setbacks: (measured to the closest point)

W Ryan's Lane

Changes in plans must be approved by the Planning & Zoning Dept.

Description	Measurement	Description	Measurement
Setback from the Centerline of Platted Road	170' Feet	Setback from the Lake (ordinary high-water mark)	80' Feet
Setback from the Established Right-of-Way	150' Feet	Setback from the River, Stream, Creek	N/A Feet
Setback from the North Lot Line	N/A Feet	Setback from the Bank or Bluff	N/A Feet
Setback from the South Lot Line	N/A Feet	Setback from Wetland	N/A Feet
Setback from the West Lot Line	170' Feet	Setback from 20% Slope Area	N/A Feet
Setback from the East Lot Line	20' Feet	Elevation of Floodplain	N/A Feet
Setback to Septic Tank or Holding Tank	10' Feet	Setback to Well	3' Feet
Setback to Privy (Portable, Composting)	30' Feet		

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

- (9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain Field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.

For The Construction Of New One & Two Family Dwellings: All Municipalities Are Required To Enforce The Uniform Dwelling Code.

The local Town, Village, City, State or Federal agencies may also require permits.

Issuance Information (County Use Only)		Sanitary Number: 184145	# of bedrooms: 2	Sanitary Date: 5-14-93
Permit Denied (Date):	Reason for Denial:			
Permit #: 14-0388	Permit Date: 9-15-14			
Is Parcel a Sub-Standard Lot	<input type="checkbox"/> Yes (Deed of Record)	<input checked="" type="checkbox"/> No		
Is Parcel in Common Ownership	<input type="checkbox"/> Yes (Fused/Contiguous lot(s))	<input checked="" type="checkbox"/> No		
Is Structure Non-Conforming	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No		
Granted by Variance (B.O.A.)	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No		
Was Parcel Legally Created	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No		
Was Proposed Building Site Delineated	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No		
Inspection Record:				
Date of Inspection: 9-14-14	Inspected by: M. T. T. T.			
Condition(s): Town, Committee or Board Conditions Attached?	<input type="checkbox"/> Yes <input type="checkbox"/> No (If No they need to be attached.)			
Debris from old cabin must be disposed of in a construction land fill.				
Signature of Inspector: Michael Stutts				
Hold For Sanitary: X Freehold	Hold For TBA: <input type="checkbox"/>	Hold For Affidavit: <input type="checkbox"/>	Hold For Fees: \$200	Date of Approval: 9-14-14